





**MO Department of Transportation**  
**General Services**  
**Facilities Management**

**FM06**

Printed Name and Title of Responsible Officer/Employee:	Signature:
Is your company registered/certified with the State of Missouri as a (Please circle): Minority Business Enterprise (MBE)? Yes No Women Business Enterprise (WBE)? Yes No	

Office Note: Attach the Prevailing Wage Orders from Division of Labor CD & the Standard Bid Provisions, General Terms and Conditions, and Special Term and Conditions found in Word under the file/new/GS Purch tab (omit the sections from the Special Terms and Conditions that do not pertain to your request).